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# Contraception versus Abortion\*

IT IS A GREAT HONOUR for me to address an IPPF Congress for the first time. Our French organization is young. It was founded in 1955, thanks to the foresight and courage of my friend Dr. Lagroua Weill-Hallé. Our experience is therefore of recent date, and I have no pretentions to teach you anything about the relationship between contraception and abortion in the world at large. It is a subject you know well, having dealt with it many times at your meetings. If I am able, in spite of this, to bring some new elements to your notice, it is because I give contraceptive advice in a Roman Catholic country, where we daily come up against preconceived ideas and principles, considered by some to be indisputable. It is one of these preconceived ideas that I wish to discuss to-day.

There are 40,000 doctors in France. Only just over 200 prescribe contraceptive methods. As to the others they make do with telling women "fend for yourself" or "make your husband sleep in the cellar!" Although they are becoming more and more ill at ease about this negative attitude, they persist in refusing contraceptive facilities for two major reasons:

The first is the fear of contraceptives leading to debauchery. Although this argument may be of great interest—and quite refutable—we shall not discuss it here, because it does not enter into the scope of to-day's study.

The second reason was put forward by the Jesuit priest, Father de Lestapis, when our organization was formed: the legalisation of contraception has everywhere caused an increase in the number of illegal abortions. This assertion impresses many of our colleagues, and constitutes a serious obstacle to the development of contraception in the French medical world.

The arguments of Father de Lestapis are based principally on the examples of Sweden, Japan and the United States of America. They have been adopted without any serious study by the opponents of the French Movement for Family Planning.

Even our Minister of Health has used this bogey. To a Senator who was demanding the legalization of contraception he answered:

The reduction of the number of abortions is doubtless a highly desirable objective. But the example of other countries does not in any way allow one to assert that a greater diffusion of contraceptive methods will enable this end to be attained. Thus in a Scandinavian country where contraceptive propaganda is free, the number of known abortions increased seven times, between 1938 and 1957, whilst that of family planning consultation centres increased in the same proportion.

The Scandinavian country where contraception has apparently caused such disasters is Sweden. Let us therefore have a look at what has happened there.

### Sweden

The annual number of legal—and therefore known—abortions, which was 454 in 1938, and 2378 in 1945, went up to 5328 in 1951, and then fell to 3386 in 1957. What therefore happened between 1938 and 1957?

At the end of 1938, the Swedish Government promulgated a law authorizing contraception on the one hand and extending on the other hand the reasons permitting therapeutic abortion (allowed since 1921 for medical reasons only, it was now authorized for medico-social, humanitarian and eugenic reasons).

In 1946, an amendment permitted the interruption of a pregnancy if, "when taking into account the physical and social circumstances of the woman, there are reasons to foresee that

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her physical or mental condition would be seriously affected by the birth of the child and by the responsibilities arising therefrom". As a result, the motive "poor state of health" was called on more and more to justify interruptions of pregnancy (21.8 per cent of these were carried out for this reason in 1947, and 50.7 per cent in 1950).

Then, from 1952 onwards, the government and the Swedish medical body, worried by the constant increase in legal abortions, put on the brakes, and the number of refusals immediately began to increase. As for contraception, on the other hand, the number of family planning consultation centres has continued to increase since 1938.

Contrary to the assertion of our Minister of Health, if the number of legal abortions has been multiplied by seven since 1938, contraception cannot be held responsible for this. The Swedish Government and doctors wanted this increase. Why? Because they were hoping (whether rightly or wrongly is not the question) that by legalizing a greater number of abortions the number of clandestine abortions would decrease in the same proportion. It is obvious that there is no connection between the legalization of contraception and the increase of known abortions.

## Japan

Let us now see what has happened in Japan. Father de Lestapis asserts: "Let it no longer be said that abroad contraception is a prophylactic against abortion. In the case of Japan, it is quite the contrary".

After the war, Japan, defeated and with an economy in ruins, had to support on a territory reduced by 40 per cent a larger population than before the war. "Never in modern times" writes Professor Okasaki, "has the problem of population and its subsistence arisen in such an acute form."

Lacking confidence in economic recovery alone, the Government decided to limit the birth rate. Hence the "Eugenic Protection Law" of 1948. This law authorized contraception and legalized abortion as well. There is nothing surprising in the fact that it should be an

emergency solution, the easy solution (i.e. abortion) which first showed results: nothing surprising that the number of interrupted pregnancies should rise from 246,104 in 1948 to 1,128,231 in 1958. But yet again, we are not called upon to judge here either the intentions or the decisions of the Japanese Government. We can only observe that, on the demographic plane, the legalization of abortion was a success, since from 1947 to 1959 the gross birth rate was reduced by 50 per cent. But yet again, contraception had nothing to do with this.

Still dealing with Japan, Father de Lestapis quotes the results of two inquiries carried out by Mr. Tatsuo Honda, Chief of the Research Department at the Tokio Institute for Research into Demographic Problems. According to Mr. Tatsuo Honda, 39 per cent of the women who underwent abortions did so before using contraceptive methods, whereas 59 per cent of them already practised contraception at the time of their abortion—hence Father de Lestapis deduces:

. . . it is much easier to go from contraception to abortion than from abortion to contraception.

Another sociologist, Mr. Riallin, after studying the same investigations, declares that:

. . . the normal process is the recourse to contraception after an abortion, because that operation is unpleasant enough to make one anxious to avoid undergoing it again.

How can one explain that Father de Lestapis and Mr. Riallin, making use of the same statistics, arrive at diametrically opposed conclusions? It is because the latter studies the figures as a scientist, whereas the former, although Professor of Family Sociology, looks at them as a moralist—and has once and for all formed his opinion of contraception. So why should the figures not support his own argument?

Indeed, it is nowhere stated in the investigations of Mr. Tatsuo Honda that the 59 per cent of women referred to had abandoned contraception. They were in fact women who, although practising birth control, had become pregnant. The figures supplied by the Japanese demographer do not lead to the deduction that contraception facilitates abortion, but that unsuccessful birth control favours abortion. Research carried out in Japan in 1959 shows that, out of a hundred couples wishing to avoid pregnancy:

- 29.9 per cent practised periodic abstention
- 4.7 per cent used diaphragms or caps
- 8.5 per cent used spermicidal jellies
- 4.6 per cent used spermicidal tablets
- 37.7 per cent used condoms

These figures show that, in 1959, few women used effective methods, and that periodic abstention was most in favour (do not let us forget that Ogino was Japanese). It is not very surprising therefore that the failures of birth control should have been very numerous; the 59 per cent of women who had abortions were, in reality, only victims of illusory contraceptive methods. What Father de Lestapis is in fact questioning is the effectiveness of contraceptive methods. And in this particular, I am entirely of his opinion.

## United States of America

As for the United States of America, the question was discussed at length in 1959, at the Congress of Arden House. The opponents of contraception have again raised the points debated at this Congress, and have widely quoted all those who made reservations about the favourable influence of contraception on the number of abortions, in particular Drs. Stone, McLane, Kinsey, Kolb, Goldstone, Nelson, Taylor and Donnelly. This allows them to declare purely and simply that even in the United States contraception has caused an increase in the number of abortions.

Father de Lestapis admits "that under a regime of legal contraception, it is possible that there are fewer interrupted pregnancies, owing to a lesser number of pregnancies occurring, rather like the decrease in car accidents during the war, which was due to a shortage of petrol and to restrictions on traffic, and not to the greater skill and prudence of the drivers." However, how can one accept this reasoning, knowing that in the United States, country of contraception, pessimists estimate that the

number of illegal abortions is 20 per cent of the total number of pregnancies, whilst in France, a country where contraception did not exist at the time Father de Lestapis' study appeared, they were estimated at 50 per cent! And yet the birth rate is higher in the United States than in France. This is therefore because there are more uninterrupted pregnancies occurring on the other side of the Atlantic than in France. To revert to the figure of speech of our opponent, there are more cars in circulation, and yet road accidents are less numerous. It is because, contrary to the assertion of Father de Lestapis, the drivers are more skilled and more prudent, and because the use of contraceptive methods has produced a favourable influence on the number of clandestine abortions.

### France

As far as we are concerned, our experience is as yet too recent for us to be able to reach definite conclusions. It is none the less true that our brief experience has allowed us to catch a glimpse of the successful results of contraception. By its very existence, it has allowed us to avoid a considerable number of abortions. Let me explain: women who had decided to interrupt their pregnancy finally decided against this when I assured them that it would be their last, that after the birth I would give them the possibility of using an effective contraceptive.

Furthermore, I have studied a group of 375 women who were using a diaphragm and a spermicidal cream, and who came to me for a check-up between 1st January and 1st September 1963. (I have not chosen a more recent period because after October 1963 a defect in the manufacture of our cream resulted in many pregnancies.)

270 of these women had been practising contraception for at least a year.

96 for at least two years.

9 for at least three years.

They had in all 660 children between them, and admitted having had 142 miscarriages: eighteen of them were pregnant. Of these eighteen pregnancies, four had been deliberate, one was due to using a diaphragm without

cream, the thirteen others were the result of conception arising through the non-use of a contraceptive during the so-called safe period, (three of them during menstruation, four immediately after, and six immediately before the estimated date of the next menstruation.) They had practised contraception regularly and correctly during the rest of the menstrual cycle.

It is certainly true that the number of cases and the duration of the use of contraceptives considered in this study are not very significant. They do nevertheless point to an interesting conclusion: nearly all the failures in contraception were due to the belief in the periodic infertility of women.

For more than thirty years, moralists in our country have taught that periodic continence is the only contraceptive method consistent with nature—and doctors have praised its effectiveness. And for more than thirty years unwanted pregnancies have followed unwanted pregnancies, and abortions have followed abortions. Faced with this fiasco, moralists and doctors will not retract, and now recommend the temperature method. After the abortions of the calendar, those of the thermometer now appear.

Faced with this imposture, what is our own attitude, as doctors of the French Movement for Family Planning? A great number among us believe that the choice of a contraceptive method must depend, for each couple, on their health, their conjugal habits, the standard of their education, their intellectual level, and also their religious convictions. They readily conclude that certain couples should have recourse to local or "per os" contraceptives, whilst others would manage quite well with periodic continence. This way of looking at things is, in my opinion, extremely dangerous. Certainly, we must take different elements into account—far be it from me to think of neglecting psychological factors, but religious convictions should only be taken into consideration in exceptional cases. Experience shows that in fact the great majority of Roman Catholics, when faced with reality, accept contraception quite readily. High principles are unshakeable when one is unmarried, or when one has only a reasonable number of children, but when

repeated pregnancies endanger the health of the couple and the equilibrium of the home, then even the most intransigent compromise arguing that theirs is a special case and that it is not only their right but also their duty to use an effective contraceptive method, even if it is forbidden by their religion. Why therefore should we be more dogmatic than the Catholics? Why should we place religious convictions in the forefront of our considerations if those directly concerned, when faced with reality, relegate these convictions to second place?

Certainly a couple must be free to make their own choice, but it is up to us to enlighten them, and to guide them towards the most effective method. And if, in spite of everything, a couple considers that religious convictions leave them no alternative but periodic continence, then we must give them all the explanations necessary to reduce the inefficacy of this method as far as possible. In any case, we must warn them of the risks they are taking, because a woman is fertile during the whole of her menstrual cycle, including during menstruation. Such should be the *leitmotiv* of our propaganda. If we wish to combat abortion effectively, we must not only make reliable contraceptives available to women, but also convince them that they must use them continuously. For the Ogino-Knaus method is responsible for millions of abortions, and we must adopt a definite attitude on this, before the myth of the thermometer causes millions of others.

## Efficacy of Different Methods

In order that my investigations should not solely reflect my own personal feelings, I have tried to support them by asking the opinion of two sets of people:

- (1) The 260 French doctors of the French Movement for Family Planning, who prescribe contraceptive methods.
- (2) 2,250 specialists in gynaecology and obstetrics spread over twelve countries. I was refused the names and addresses of specialists in eastern countries; Poland was the exception, thanks to the kindness of Dr. Bednarski, Deputy Minister of Health.

I put several questions to these doctors, but I will only deal with two here:

What is your opinion of the efficacy of the Ogino-Knaus method, the temperature method, the combination of cap and spermicide, and the ovulation inhibitors?

Table 1 summarizes the replies received so far from doctors in the U.S.A.—eighty-two

TABLE 1

	Very reliable		Not very reliable	
U.S.A. (82 replies)				
Ogino-Knaus				
method	1	12	38	31
Temperature				
method	2	19	54	7
Cap+			_	
spermicide	42	30	0	10
Ovulation		_	_	
inhibitors	72	0	0	10
FRANCE (66 replies) Ogino-Knaus				
method	3	0	56	7
Temperature		·	50	•
method	5	32	19	10
Cap+				
spermicide	58	8	0	0
Ovulation				
inhibitors	52	7	1	6

replies to 536 questionnaires sent, and from prescribing doctors who are members of the French Movement for Family Planning—sixty-six replies to 260 questionnaires. (A further 222 questionnaires were sent to gynaecologists and accoucheurs in France, and were contemptuously ignored: only fourteen replies were received.)

Table 2 shows the replies to the second question: the influence of contraception on clandestine abortions.

The complete results of this inquiry will be published later, if enough replies are received.

But the first sample shows that, in the United States as in France those who believe that contraception has an unfavourable influence on the number of illegal abortions are in the minority (in the United States 16·1 per cent of the doctors who expressed an opinion, in France only 1·8 per cent). These replies also show that the best results are obtained with ovulation inhibitors, and the combination of cap and spermicidal cream—that is, just those methods forbidden by our opponents, and that periodic continence is not very reliable—that periodic continence which our opponents persist in advocating. It is not at all surprising therefore,

TABLE 2

	No influence	Decrease in abortions	Increase in abortions	No opinion
U.S.A.	31	21	10	20
France	1	52	1	12

that unwanted pregnancies and abortions should be so numerous in our country!

Einstein declared that we are living in sad times, when it is more difficult to break down a prejudice than to split the atom. It is in any case deplorable to realize that though a man is free to marry or remain single, though he even has the right to divorce, at least in most countries, he is denied by some the right to have children as and when he wants them. In short, it is distressing to see the freedom of the individual still hampered by deeply-rooted prejudices. It was eventually admitted that the earth is round and that it revolves. It will one day have to be admitted that freedom to plan a family is an undeniable right. Dr. Senior's prediction that contraception will take the place of abortion, just as abortion has replaced infanticide, will then become reality.